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22764 U.S. PTO

Attorney's Docket No. 760-84 CON 4

PATENT

31353 U.S. PTO  
10/775536

021004

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE****Mail Stop: PATENT APPLICATION**

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

**NONPROVISIONAL PATENT APPLICATION TRANSMITTAL**

Sir:

Transmitted herewith for filing is the patent application of:

First Named Inventor (or Inventors):

**RUDNICK, James J., a citizen of the United States of America, whose address is: 74 Moore Avenue, Waldwick, NJ 07463****WIKTOR, Dominik M., a citizen of the United States of America, whose address is: 4 Culin Drive, Cranford, NJ 07016**

Title of Application:

**NESTED STENT****1. Type of Application (37 C.F.R. 1.53(b))**

This application is a(n):

- ☐ Original (nonprovisional) application.
- ☒ Continuing application:
- ☐ Divisional ☒ Continuation ☐ Continuation-in-Part (CIP)

of Application No. 09/977,823, filed on October 15, 2001, which is a continuation of U.S. Application No. 09/271,304, filed March 17, 1999, now U.S. Patent No. 6,319,277, which is a continuation of U.S. Application No. 08/708,651, filed September 5, 1996, now U.S. Patent No. 5,906,639, which is a continuation of U.S. Application No. 08/289,791, filed August 12, 1994, now U.S. Patent No. 5,575,816, which is incorporated herein by reference.

**CERTIFICATION UNDER 37 C.F.R. 1.10**

I hereby certify that this New Application Transmittal and the documents referred to as enclosed herein are being deposited with the United States Postal Service on this date, February 10, 2004, in an envelope as "Express Mail to Addressee" Mailing Label Number EV261767281US, addressed to Mail Stop: Patent Application, Commissioner of Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

M J Mullin  
Name of person mailing paper

M J Mullin  
Signature of person mailing paper

**2. Benefit of Prior U.S. Application(s) (35 U.S.C. 119(e), 120, or 121)**

- ☒ This new application claims the benefit of prior U.S. application(s).
- ☒ A Preliminary Amendment is enclosed amending this application to state the relation of this application to prior applications.
- ☐ The relation of this application to prior applications is stated in the application.

**3. 35 U.S.C. 119(a)-(d) or 35 U.S.C. 365(a)-(b) Foreign Priority Claim for Prior Application**

This application, and prior U.S. application(s), including any prior International Application designating the U.S., identified above in item 2, claim(s) priority from one or more foreign applications as follows:

(Country)	(Application No.)	(Filing Date) (mm/dd/yyyy)

- ☐ Please amend the specification by inserting, after the title, the following:
- ☐ "The application claims priority from Application No. \_\_\_\_\_ filed on \_\_\_\_\_."

Certified copy(ies) of the application(s) from which priority under 35 U.S.C. 119 is claimed:

- ☐ has(have) been filed on \_\_\_\_\_, in prior application \_\_\_\_\_, which was filed on \_\_\_\_\_.
- ☐ is (are) enclosed.
- ☐ will follow.

4. **Enclosed Papers Required to Obtain Application Filing Date under 37 C.F.R. 1.53(b)**

<u>12</u>	Pages of Specification		
<u>3</u>	Pages of Claims		
<u>1</u>	Pages of Abstract		
<u>4</u>	Sheets of Drawings	<input checked="" type="checkbox"/> Formal	<input type="checkbox"/> Informal

5. **Oath or Declaration**

- ☐ Newly executed Oath or Declaration (original or copy) is enclosed.
- ☒ Copy of Oath or Declaration from prior continuation or divisional application **08/289,791** (37 C.F.R. 1.63(d)).
- ☒ The entire disclosure of the prior application, from which a copy of the oath or Declaration is supplied, is considered as being a part of the disclosure of the accompanying application and is hereby incorporated by reference therein.
- ☒ A Power of Attorney is included in the Oath or Declaration.
- ☐ Not enclosed.

6. **Additional Papers Enclosed**

- ☒ Return Receipt Postcard (specifically itemized) (M.P.E.P. § 503).
- ☐ Application Data Sheet (Voluntary under 37 C.F.R. 1.76).
- ☒ Preliminary Amendment.
- ☐ Information Disclosure Statement (37 C.F.R. 1.98).
- ☐ Form PTO-1449 ☐ Copies of IDS Citations
- ☐ Nucleotide and/or Amino Acid Sequence Listing computer-readable copy, paper copy, and statement verifying identity of computer-readable and paper copies.
- ☐ Certified Copy of Priority Document(s).
- ☐ Verified translation of non-English language application (37 C.F.R. 1.52(d)).
- ☒ Other: **Change of Address Indication Form.**

**7. Assignment**

- ☒ An assignment of the invention to **Meadox Medicals, Inc.**
- ☐ is enclosed. A separate:
- ☐ "Cover Sheet for Assignment (Document) Accompanying New Patent Application" is enclosed.
- ☐ Form PTO-1595 is enclosed.
- ☒ was made in prior application No. **08/289,791**, filed on **August 12, 1994**.
- ☒ A copy of the assignment (and any recordation cover sheet) is enclosed.
- ☐ will follow.
- ☐ Not enclosed.

**8. Request That Application Not Be Published Pursuant to 35 U.S.C. 122(b)(2)**

- ☐ Pursuant to 35 U.S.C. 122(b)(2), Applicant(s) hereby requests that this patent application not be published pursuant to 35 U.S.C. 122(b)(1). Applicant hereby certifies that the invention disclosed in this application has not and will not be the subject of an application filed in another country, or under a multilateral international agreement, that requires publication of applications 18 months after filing of the application.

**Warning**

An applicant who makes a request not to publish, but who subsequently files in a foreign country or under a multilateral international agreement specified in 35 U.S.C. 122(b)(2)(B)(i), must notify the Director of such filing not later than 45 days after the date of the filing of such foreign or international application. A failure of the applicant to provide such notice within the prescribed period shall result in the application being regarded as abandoned, unless it is shown to the satisfaction of the Director that the delay in submitting the notice was unintentional.

**9. F Calculation (37 C.F.R. 1.16)**

Utility Application (37 C.F.R. 1.16(a)) Basic Fee \$770.00

**FEES FOR CLAIMS AS FILED**

Number filed	Number extra	Rate		
Total Claims (37 C.F.R. 1.16 (c))	7 - 20	= 0	x \$ 18.00	= \$ 0.00
Independent Claims (37 C.F.R. 1.16(b))	3 - 3	= 0	x \$ 86.00	= \$ 0.00
Multiple Dependent Claims (37 C.F.R. 1.16(d))		+ \$ 290.00	=	\$
Fee Calculation for Extra Claims				\$ 0.00

☐ Amendment canceling extra claims enclosed.

☐ Amendment deleting multiple-dependencies enclosed.

Total Filing Fee Calculation \$ \_\_\_\_\_

**10. Small Entity Statement**

☐ Small entity status is claimed under 37 C.F.R. 1.27.

Filing Fee Calculation (50% of Filing Fee calculated in Item 9 above) \$ \_\_\_\_\_

**11. Fee Payment**

☒ Not enclosed. No filing fee is to be paid at this time.

☐ Enclosed:

☐ Basic filing fee (Item 9 or 10 above) \$ \_\_\_\_\_

☐ Fee for recording Assignment  
\$40.00 (37 C.F.R. 1.21(h)) \$ \_\_\_\_\_

☐ Processing and retention fee  
\$130.00 (37 C.F.R. 1.53(d) and 1.21(l)) \$ \_\_\_\_\_

Total fees enclosed \$ 0.00.

**12. Method of Payment of Fees**

- ☐ Check in the amount of \$\_\_\_\_\_.
- ☐ Charge Deposit Account No. \_\_\_\_\_ in the amount of \$\_\_\_\_\_.  
A duplicate of this transmittal is enclosed.

**13. Authorization to Charge Additional Fees**

- ☐ The Commissioner is hereby authorized to charge the following additional fees by this paper and during the entire pendency of this application to Deposit Account No. \_\_\_\_\_:
- ☐ 37 C.F.R. 1.16(a), (f), or (g) (filing fees)
- ☐ 37 C.F.R. 1.16(b), (c), and (d) (presentation of extra claims)
- ☐ 37 C.F.R. 1.16(e) (surcharge for filing the basic fee and/or declaration at a date later than the filing date of the application)
- ☐ 37 C.F.R. 1.17 (application processing fees)

A duplicate of this transmittal is enclosed.

**14. Instructions as to Overpayment**

- ☒ Credit Deposit Account 08-2461. ☐ Refund.

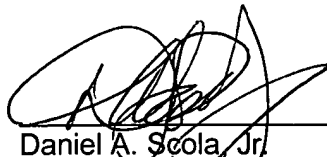
**15. Correspondence Address**

- ☒ Customer Number or Bar Code Label: 23869

Please address all correspondence to:

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Daniel A. Scola, Jr.  
Registration No. 29,855  
Attorney/Agent for Applicant(s)

Please type a plus sign (+) inside this box →



PTO/SB/121 (05-03)

Approved for use through 11/30/2005. OMB 0651-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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## CORRESPONDENCE ADDRESS INDICATION FORM

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Request for Customer Number (PTO/SB/125) submitted herewith.

in the following listed application(s) or patent(s) :

Patent Number (if appropriate)	Application Number	Patent Date (if appropriate)	U.S. Filing Date
	Continuation Application for Application No. 09/977,823 filed 10/15/01		

Typed or Printed Name	Daniel A. Scola, Jr.	<b>(check one)</b> <input type="checkbox"/> Applicant or Patentee <input type="checkbox"/> Assignee of record of the entire interest. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96) <input checked="" type="checkbox"/> Attorney or Agent of record  29,855 (Reg. No.)
Signature		
Date	February 10, 2004	
Address of signer: Hoffmann & Baron, LLP, 6900 Jericho Turnpike, Syosset, New York 11791		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below \*.

☒ \*Total of 1 forms are submitted.

This collection of information is required by 37 CFR 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending on the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS.

SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2